This fund is intended to assist undocumented students in a variety of situations, including travelling home for emergencies, medical expenses, travelling home for breaks, winter clothing/shoes, and textbooks. Students without DACA or other forms of temporary protection such as TPS will be given first priority. There is no limit on how many times a student may apply for and receive aid from this fund.

All of the information disclosed in this application will remain confidential. Staff members who will review this application are Maureen Raucher (CRSL Program Coordinator) and Matilda Cantwell (CRSL Director); in the case of the need for more information, Susan Zachary (Executive Assistant to the Dean of the College) and/or Caitlin Szymkowicz (Associate Dean of International Students) may also read the application.

Please fill out this form and email it to Maureen Raucher (mraucher@smith.edu). If you are requesting funds to pay for expenses already accrued, you must include any receipts, confirmation emails, etc. You may also drop off materials to Maureen in the Center for Religious Life, office B7, located in the lower level of the Helen Hills Hills Chapel.
Undocumented Student Support Fund
Fund Application

Name: ________________________________________________________________________

Smith Email: ___________________________________________________________________

ID: ___________________________ Class Year: ____________________________

Amount Requested: _____________________________________________________________

Purpose of funds requested (e.g. travel, books, clothing): _______________________________

______________________________________________________________________________

Is this funding request time sensitive? ____________________________________________

A. If yes, when do you need it by? ____________________________________________

Have you already received funds for this specific request? ____________________________

A. If so, how much: _____________________________________________________________

B. From what source: __________________________________________________________

Signature: ____________________________________________ Date: ____________________

Please submit receipts to Maureen Raucher after expenses have been met.

______________________________________________________________________________

For office use only

Approved by: __________________________________________________________________

Amount: _______ Fund Source: _______________________ Org: _______ Account: _________

______________________________________________________________________________

To Controller

Please direct deposit the amount of: _______________________________________________

To: ___________________________________________________________________________

ID: ___________________________________________________________________________

Authorized Signature: _____________________________________________ Date: __________